

☐ UNCLASSIFIED ☐ INTERNAL USE ONLY ☐ CONFIDENTIAL ☐ SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional) Contract Information & Check List - (Enilio Americo RODRIGUEZ) ⁰⁴			
FROM: Chief, WH/L/Personnel, 2004 Qtrs. Eye		DATE: 26 JUL 1961	
TO: (Officer designation, room number, and building)	DATE RECEIVED	DATE FORWARDED	OFFICER'S INITIALS
1. Chief, WE/L/Support	27 July 61		[Signature]
2.			
3. Contract Personnel Divn., 2125 Eye Bldg.			[Signature]
4. WH-C-Pers			[Signature]
5. Dirich			[Signature]
6. DC/WH/4			[Signature]
7.			
8. C/WH/4/F1-			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

Your Signature, please, as Contract Approving Officer.

TO CASE OFFICER

1) A COPY OF THE CHECK LIST MUST BE FILED IN THE "FEDERAL TIME DATA" (FED-1)

2) SET RECORDED BY MINUTEMAN OF THE FEDERAL TIME DATA (FED-1)

4-5 Will you assist on #313A PLo - then pass to DC/WH/4

NOTE: #11, b seems improper - Held

4-6 FYI

(8) I will be glad to assist with 313a - para 11 b. is proper since medical benefits are included

FORM 1 DEC 58 610 USE PREVIOUS EDITIONS ☐ SECRET ☐ CONFIDENTIAL ☐ INTERNAL USE ONLY ☐ UNCLASSIFIED

470

CONTRACT INFORMATION AND CHECK LIST		DATE OFFICER R. G. Soehner		DIVISION WH/4	
INSTRUCTIONS: See Form 1000-1 for guidance. Complete all items, including "X" when items are not applicable. Forward original and TDU copies for preparation of contract.		TELEPHONE EXTENSION 4803		DATE 26 July 1961	
SECTION I					
1. NAME <input type="checkbox"/> PREFIX <input checked="" type="checkbox"/> TRICE (Emilio AMERICO Rodriguez)		2A. PROJECT JMATE		3. ALLOTMENT NO. 25355000-8021	
5. PREVIOUS CIA PSEUDONYM OR ALIASES		2B. PERMANENT STATION Headquarters		4. SLOT NO.	
7. SECURITY CLEARANCE (Type and date) OA created 30 June 1960		2C. MEDICAL CLEARANCE <input type="checkbox"/> OBTAINED <input type="checkbox"/> INITIATED <input checked="" type="checkbox"/> NOT REQ'D.		8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) Contract agent			
SECTION II PERSONAL DATA					
11. CITIZENSHIP U.S.		12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO		13. AGE 33	
15. LEGAL RESIDENCE (City and state or country) (Edenton, North Carolina) 10		16. CURRENT RESIDENCE (City and state or country) (Edenton, North Carolina) 10		14. DATE OF BIRTH (Month, day, year) (27 Jan 1928) A	
17. MARITAL STATUS (Check as appropriate) <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED		18. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
19. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: Five (5): wife and four children					
SECTION III U.S. MILITARY STATUS					
20. RESERVE NO		21. VETERAN NO		22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
23. BRANCH OF SERVICE NA		24. RANK OR GRADE NA		25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
SECTION IV COMPENSATION					
27. BASIC SALARY \$9,600		28. POST DIFFERENTIAL NA		29. COVER (Breakdown, if any) NA	
30. FEDERAL TAX WITHHOLDING					
COVER		CIA			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)					
31. QUARTERS		32. POST		33. OTHER	
34. COVER (Breakdown, if any) NA					
SECTION VI TRAVEL					
35. TYPES <input type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input checked="" type="checkbox"/> FOREIGN OPERATIONAL		36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
37. HME TO BE SHIPPED <input type="checkbox"/> YES <input type="checkbox"/> NO		37A. HME TO BE STORED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		38. PERSONAL VEHICLE TO BE SHIPPED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH Wife - (Pauline Juanita Ross Rodriguez) 37 yrs old, U.S. Children - (Emilio Americo Rodriguez, Jr.) 10 yrs old, U.S. (Joseph Ross Rodriguez) 8 yrs old, U.S. (Patti Michelle Rodriguez) 6 yrs old, U.S. (Paul Marshal Rodriguez) 3 yrs old, U.S.					
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES					
SECTION VII OPERATIONAL EXPENSES					
42. PURCHASE OF INFORMATION Yes		43. ENTERTAINMENT Yes		44. OTHER 201-(274049)08	
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES					

26 Jul '61

00/170

(CONTINUED)		DATE: 28 July 1961																																																				
SECTION VIII		OTHER BENEFIT: 2803																																																				
48. BENEFITS (See E 22-615, E 20-620, E 20-670, E 20-1000, and HR 20-620-1, HR 20-1240-1 and or successor regulations for benefits applicable to various categories of contract personnel.)																																																						
Injury and death benefits (in line of duty) not to exceed \$5,000.																																																						
SECTION IX																																																						
47. STATUS (Check)		COVER ACTIVITY																																																				
<input checked="" type="checkbox"/> ADJUDICATED <input checked="" type="checkbox"/> ESTABLISHED		49. TYPE (Check) <input type="checkbox"/> PROPRIETARY <input type="checkbox"/> CULTURAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> TOURIST <input type="checkbox"/> SUBSIDIARY <input type="checkbox"/> EDUCATIONAL <input checked="" type="checkbox"/> MILITARY <input type="checkbox"/> OTHER																																																				
49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL																																																						
SECTION X																																																						
50. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.) <input type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input type="checkbox"/> NONE																																																						
SECTION XI																																																						
51. DURATION		52. EFFECTIVE DATE																																																				
DAYS: MONTHS: 2 YEARS:		15 July 1961																																																				
54. TERMINATION NOTICE (Number of days)		53. RENEWABLE																																																				
30 days		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																																				
55. FULFILLMENT OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																																				
SECTION XII																																																						
56. PRIMARY FUNCTION (CI, FI, PP, other)																																																						
FI																																																						
SECTION XIII																																																						
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED																																																						
Development, recruitment and handling of FI agents.																																																						
SECTION XIV																																																						
58. EXPERIENCE																																																						
Subject was one of the principal agents of the FI net in Cuba after the break in diplomatic relations.																																																						
59. EDUCATION																																																						
(Check Highest Level Attained) <input type="checkbox"/> GRADE SCHOOL <input type="checkbox"/> HIGH SCHOOL GRADUATE <input type="checkbox"/> TRADE SCHOOL GRADUATE <input type="checkbox"/> BUSINESS SCHOOL GRADUATE <input type="checkbox"/> COMMERCIAL SCHOOL GRADUATE <input type="checkbox"/> COLLEGE (No degree) <input checked="" type="checkbox"/> COLLEGE DEGREE <input checked="" type="checkbox"/> POST GRADUATE <input checked="" type="checkbox"/> MA <input type="checkbox"/> PHD																																																						
60. LANGUAGE COMPETENCY																																																						
(Check Appropriate Degree Competency) <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">LANGUAGE</th> <th colspan="3">SPEAK</th> <th colspan="3">WRITE</th> <th colspan="3">READ</th> <th rowspan="2">ST. INDIVIDUAL'S COUNTRY OF ORIGIN</th> </tr> <tr> <th>FLUENT</th> <th>AVERAGE</th> <th>POOR</th> <th>FLUENT</th> <th>AVERAGE</th> <th>POOR</th> <th>FLUENT</th> <th>AVERAGE</th> <th>POOR</th> </tr> </thead> <tbody> <tr> <td>Spanish</td> <td>X</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td rowspan="3">Cuba</td> </tr> <tr> <td>Portuguese</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> </tr> <tr> <td>French</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> </tr> </tbody> </table>				LANGUAGE	SPEAK			WRITE			READ			ST. INDIVIDUAL'S COUNTRY OF ORIGIN	FLUENT	AVERAGE	POOR	FLUENT	AVERAGE	POOR	FLUENT	AVERAGE	POOR	Spanish	X			X			X			Cuba	Portuguese			X			X			X	French			X			X			X
LANGUAGE	SPEAK				WRITE			READ			ST. INDIVIDUAL'S COUNTRY OF ORIGIN																																											
	FLUENT	AVERAGE	POOR	FLUENT	AVERAGE	POOR	FLUENT	AVERAGE	POOR																																													
Spanish	X			X			X			Cuba																																												
Portuguese			X			X			X																																													
French			X			X			X																																													
61. AREA KNOWLEDGE																																																						
Italian X X X																																																						
Very good; was born in Cuba and lived there many years.																																																						
SECTION XV																																																						
62. EMPLOYMENT PRIOR TO CIA																																																						
63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING																																																						
1954-1960 was manager of a (combined Havana District Sales office for various U.S. firms.) Income estimated at about \$10,000 yearly.																																																						
SECTION XVI																																																						
64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)																																																						
NA																																																						
APPROVAL																																																						
DATE	TYPED NAME & SIGNATURE OF REQUESTING OPERATOR	DATE	TYPED NAME & SIGNATURE OF CONTRACT APPROVING																																																			
28 July 1961	[Signature]	27 July 1961	[Signature] 03																																																			

SECRET

2/mj